| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004   |                |   |   |   |  |  |              |                     | Application or Docket Number |    |                     |                        |
|--|----------------|---|---|---|--|--|--------------|---------------------|------------------------------|----|---------------------|------------------------|
| CLAIMS AS FILED - PART I  (Column 1) (Column 2)  |                |   |   |   |  |  | , <u>.</u>   | SMALL ENT<br>TYPE   |                              | OR | OTHER SMALL E       |                        |
| U.S. NATIONAL STAGE FEES   |                |   |   |   |  |  |              | RATE                | FEE                          | ]  | RATE                | FEE                    |
| BASIC FEE  |                |   | SMALL ENT. = \$ 150   |   | LARG                                   | LARGE ENT. = \$ 300                    |              | BASIC FEE           |                              | OR | BASIC FEE           | 300                    |
| EXAMINATION FEE  |                |   |   | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100 |  | All other situations = \$ 100 / \$ 200 |              | EXAM. FEE           |                              | 1  | EXAM. FEE           | 200                    |
| SEARCH FEE   |                |   | U.S. is ISA = \$50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |   | All other situations = \$ 250 / \$ 500 |  |              | SEARCH FEE          |                              |    | SEARCH FEE          | 500                    |
| FEE FOR EXTRA SPEC. PGS.   |                |   | minus 100 =   |   | / 50 =                                 |  |              | X \$ 125 =          |                              | 1  | X \$ 250 =          |                        |
| TOTAL CHARGEABLE CLAIMS  |                |   | i) min  | nus 20 =  |  |  |              | X \$ 25 =           |                              | OR | X \$ 50 =           |                        |
| INDE   | EPENDENT CL    | AIMS  | · m   | minus 3 =   |  | *                                      |              | X \$ 100 =          | -                            | OR | X \$ 200 =          |                        |
| MUL  | TIPLE DEPENI   | DENT CLAIM PRE                                  | ESENT   | ESENT   |  |  |              | + \$ 180 =          |                              | OR | + \$ 360 =          |                        |
| * If   | the difference | e in column 1 is I                              | less than zero  | , enter "(  | O" in co                               | lumn 2                                 |              | TOTAL               |                              | OR | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST  |                |   |   |   |  | • 4                                    | SMALL ENTITY |                     | OR                           | T  |                     |                        |
| NT A   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT       |   | PAID  | IBER<br>OUSLY                          | PRESENT<br>EXTRA                       |              | RATE                | ADDI-<br>TIONAL<br>FEE       |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total          | *   | Minus   | **  |  | =                                      |              | X \$ 25 =           |                              | OR | X \$ 50 =           |                        |
| AME  | Independent    | *   | Minus   | ***   |  | =                                      |              | X \$ 100 =          |                              | OR | X \$ 200 =          |                        |
|  | FIRST PRES     | SENTATION OF M                                  | ULTIPLE DEPI  | ENDENT  | CLAIM                                  |  |              | + \$ 180 =          |                              | OR | + \$ 360 =          |                        |
|  |                |   |   |   |  |  |              | TOTAL ADDIT.<br>FEE |                              | OR | TOTAL ADDIT.<br>FEE |                        |
|  |                | (Column 1)                                      |   | (Colu   | 21                                     | (Calumn 2)                             |              |                     |                              |    |                     |                        |
| ПВ   |                | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT |   | (Colur<br>HIGH<br>NUM<br>PREVIO<br>PAID             | IEST<br>IBER<br>OUSLY                  | (Column 3)  PRESENT EXTRA              |              | RATE                | ADDI-<br>TIONAL<br>FEE       |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| DME  | Total          | *   | Minus   | **  |  | =                                      |              | X \$ 25 =           |                              | OR | X \$ 50 =           |                        |
| AMENDMENT  | Independent    | *   | Minus   | ***   |  | =                                      |              | X \$ 100 =          |                              | OR | X \$ 200 =          |                        |
|  | FIRST PRES     | ENTATION OF M                                   | IULTIPLE DEPE   | ENDENT  | CLAIM                                  |  |              | + \$ 180 =          |                              | OR | + \$ 360 =          |                        |
|  |                |   |   |   |  |  |              | TOTAL ADDIT.<br>FEE |                              | OR | TOTAL ADDIT.<br>FEE |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                |   |   |   |  |  |              |                     |                              |    |                     |                        |